

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

FILED
 98 NOV 30 PM 1:16
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # PA4000066583

1. Corporation Name
 Global Corporate Quality, Inc.

Principal Place of Business 265 Sunrise Avenue Suite 204 Palm Beach, FL 33480	Mailing Address 265 Sunrise Avenue Suite 204 Palm Beach, FL 33480
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REINSTATEMENT *Feb-98*

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country

4. Date Incorporated or Qualified To Do Business in Florida	9/12/94
5. FEI Number	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED	<input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P,S,T	Richard W.A. Davis	2637 Mohawk Circle	West Palm Beach, FL 33409 800002706258--9 -12/08/98--01057--020 ***1350.00 ***1350.00

8. Name and Address of Current Registered Agent

Donald F. Mintmire
 265 Sunrise Avenue
 Suite 204
 Palm Beach, FL 33480

9. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 Suite, Apt. #, Etc.
 City State Zip Code
 FL

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent Donald F. Mintmire Date _____
 REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No (See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Richard W.A. Davis Date _____ Daytime Phone # _____
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E040 (1/98)